

CLAIMS ONLY							Application Number 10/606864		Filing Date	
							Applicant(s)			
							* May be used for additional claims or amendments			
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT					
	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend
1							61			
2							62			
3							63			
4							64			
5							65			
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38							98			
39							99			
40							100			
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46										
47										
48										
49										
50										
Total Indep	1						Total Indep			
Total Depend	11						Total Depend			
Total Claims	12						Total Claims			